

CJA 20 APPOINTMENT OF AND AUTHORITY TO PAY COURT APPOINTED COUNSEL (Rev. 12/03)

1. CIR./DIST./ DIV. CODE SDTX-TXSCC (Div. 2)	2. PERSON REPRESENTED Max Alberto Cruz and Douglas Fernando Ramos-Banegas	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER CR C-06-129M	4. DIST. DKT./DEF. NUMBER	5. APPEALS DKT/DEF. NUMBER	6. OTHER DKT. NUMBER
7 IN CASE/MATTER OF (Case Name) USA V. Martinez	8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal	9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	10. REPRESENTATION TYPE (See Instructions)

11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense.

Material Witness(es)12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix),
AND MAILING ADDRESS

Dennis Michael Sliter
PO Box 3371
Corpus Christi, TX 78404

Telephone Number : **361-852-1135** Fax: **361-888-5780**

13. COURT ORDER

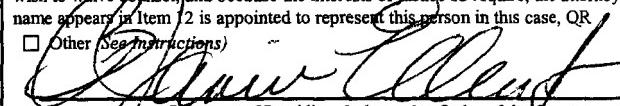
- O Appointing Counsel C Co-Counsel
 F Subs For Federal Defender R Subs For Retained Attorney
 P Subs For Panel Attorney Y Standby Counsel

Prior Attorney's

Appointment Dates:

Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, QR
 Other (See instructions)

Signature of Presiding Judge or By Order of the Court


Feb 21, 2006
201-06

Date of Order

Nunc Pro Tunc Date

Repayment or partial repayment ordered from the person represented for this service at time appointment. YES NO

14. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per instructions)

CLAIM FOR SERVICES AND EXPENSES**FOR COURT USE ONLY**

	CATEGORIES (Attach itemization of services with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW
In Court	a. Arraignment and/or Plea					
	b. Bail and Detention Hearings					
	c. Motion Hearings					
	d. Trial					
	e. Sentencing Hearings					
	f. Revocation Hearings					
	g. Appeals Court					
	h. Other (Specify on additional sheets)					
	(RATE PER HOUR = \$) TOTALS:					
Out of Court	a. Interviews and Conferences					
	b. Obtaining and reviewing records					
	c. Legal research and brief writing					
	d. Travel time					
	e. Investigative and other work (Specify on additional sheets)					
	(RATE PER HOUR = \$) TOTALS:					
17.	Travel Expenses (lodging, parking, meals, mileage, etc.)					
18.	Other Expenses (other than expert, transcripts, etc.)					

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM: _____ TO: _____	20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION	21. CASE DISPOSITION
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22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number	_____	23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR./CERT.
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28. SIGNATURE OF THE PRESIDING JUDGE	DATE	28a. JUDGE CODE
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29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED
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34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.	DATE	34a. JUDGE CODE
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APPROVED FOR PAYMENT — COURT USE ONLY				
23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR./CERT.
28. SIGNATURE OF THE PRESIDING JUDGE	DATE	28a. JUDGE CODE		
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